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CONFIRMATION NO. 1231

<b>SERIAL NUMBER</b> 09/868,442	<b>FILING OR 371(c) DATE</b> 07/24/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> 62803.000008
<b>APPLICANTS</b> Samir S. Mitragotri, Goleta, CA; Joseph Kost, Cambridge, MD; Scott C. Kellogg, Boston, MA; Nicholas F. Warner, Belmont, MA; Tuan A. Elstrom, Lake Bluff, IL;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US99/30065 12/17/1999 which claims benefit of 60/112,953 12/18/1998 and claims benefit of 60/142,941 07/12/1999 and claims benefit of 60/142,950 07/12/1999 and claims benefit of 60/142,951 07/12/1999 and claims benefit of 60/142,975 07/12/1999				
<b>** FOREIGN APPLICATIONS *****</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 19	<b>TOTAL CLAIMS</b> 157
<b>INDEPENDENT CLAIMS</b> 14				
<b>ADDRESS</b> 21967				
<b>TITLE</b> METHODS AND APPARATUS FOR ENHANCEMENT OF TRANSDERMAL TRANSPORT				
<b>FILING FEE RECEIVED</b> 1888	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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